



# **Request for Proposals (RFP)**

## **2004 OJJDP Title II (Challenge Grant)**

**Activity I: Health, Mental Health, and Education Services  
for Youth in the Juvenile Justice System**

**Activity II: Community-Based Alternatives to Incarceration**

**Activity III: Alternatives to Suspension and Expulsion  
from School**

***Proposals Due: February 27, 2004***

*The Governor's Juvenile Justice Advisory Committee (GJJAC), through its staff within the Office of Juvenile Justice, Department of Social and Health Services, administers the federal Office of Juvenile Justice and Delinquency Prevention (OJJDP) Title II Challenge Grants Program.*

# **Governor's Juvenile Justice Advisory Committee (GJJAC)**

## ***2004 Challenge Grant Request for Proposals***

### **Introduction**

The Governor's Juvenile Justice Advisory Committee (**GJJAC**) is requesting proposals for the Office of Juvenile Justice and Delinquency Prevention (OJJDP) Title II **Challenge Activity Grant Program**.

The OJJDP Challenge Activities Grant Program has been authorized under the federal Juvenile Justice and Delinquency Prevention Act (JJDP Act) as defined in the 1992 amendments to the Act.

### **Contract Period**

Projects will be funded for one contract year only (July 1, 2004, through June 30, 2005).

### **Amount of Grant Award**

One project will be funded in **Activity I**, with a proposed budget for 12 months **not to exceed \$83,000**; one project will be funded in **Activity II**, with a proposed budget for 12 months **not to exceed \$83,000**; and one project will be funded in **Activity III** with a proposed budget for 12 months **not to exceed \$83,000**. (A total of \$249,000 is available for projects under Activities I, II and III).

### **Purpose of Challenge Grants**

The purposes of the three challenge activity areas are:

#### **Activity I: Health, Mental Health and Education Services for Youth in the Juvenile Justice System**

To develop and adopt policies and programs to provide basic health, mental health, and appropriate education services, including special education for youth in the juvenile justice system, as specified in standards developed by the National Advisory Committee for Juvenile Justice and Delinquency Prevention, prior to October 12, 1984. **(See Attachment I)**

One project for up to \$83,000 will be funded under Activity I.

#### **Activity II: Community-Based Alternatives to Incarceration**

To increase community-based alternatives to incarceration by establishing programs (such as expanded use of probation, mediation, restitution, community service, treatment, home detention, intensive supervision, and electronic monitoring) and developing and adopting a set of objective criteria for the appropriate placement of juveniles in detention and secure confinement.

One project for up to \$83,000 will be funded under Activity II.

#### **Activity III: Alternatives to Suspension and Expulsion from School**

To develop and adopt policies and programs designed to serve as alternatives to suspension and expulsion from school.

One project for up to \$83,000 will be funded under Activity III.

## **Evaluation Requirement:**

Projects ultimately selected for funding will be required to contract with an outside, independent evaluator to assess the effectiveness of their projects, within 45 days of the contract start date. The GJJAC expects that all evaluators will have a minimum of a Masters degree, training in evaluation design, and two years of prior experience as an evaluator. An evaluation design, using the **Logic Model**, will be required in the full grant application, if your proposal is selected as a finalist. While an evaluation design is not required for this proposal, your proposed goals, objectives and activities need to be presented in the Logic Model format. **(See Attachment D.)**

## **Who Can Apply**

Public and private agencies may apply, such as private non-profit agencies, tribes, city and county governments, schools, school districts, and state agencies. There is *no* match requirement for the federal funds. Applicants are encouraged to collaborate with other agencies and/or organizations and to pool resources.

## **How to Apply**

The GJJAC seeks **brief** proposals. You are encouraged to work with an evaluator to conceptualize your project and write your proposal. The GJJAC has adopted the Logic Model format for project evaluations.

~~✍~~ Your proposal **must not exceed nine (9) pages in total**. (See attachment D for the proposal format).

~~✍~~ Proposal pages must have one-inch margins and a minimum of 11-point font size.

~~✍~~ The proposal must have a **Proposal Face Sheet** (see Attachment A), which counts as 1 of the 9 pages.

~~✍~~ The proposal must have a **Proposed Budget** (see Attachment B), which counts as 1 of the 9 pages.

~~✍~~ The proposal must have a **Project Description** (see Attachment C-1, C-2, and C-3) of no more than seven (7) pages. Your project description will use both narrative and the Logic Model format. (See Attachment G).

## **Eligibility Criteria**

### **In order to be eligible for funding:**

1. Submit one original and three (3) copies of the proposal to:

<b>Mailing Address:</b>	<b>Street Address:</b>
Office of Juvenile Justice Department of Social and Health Services PO Box 45203 Olympia, WA 98504-5203	Office of Juvenile Justice 3704 Griffin Lane SE Olympia, WA 98504-5203 (360) 407-0151

2. Be sure your proposal is not more than **nine (9) pages** in length, including the Proposal Face Sheet and the Proposed Budget Sheet (see Attachments A and B), and has a font size of at least 11 points.
3. Follow the format in the RFP, and complete every section. Please do not attach additional support documents (e.g., cover letters, letters of support, additional narratives, brochures, etc). They will

not be forwarded to the GJJAC Grants Procedures Subcommittee (or Proposal Review Subcommittee) members, nor considered in deliberations.

4. Note that governmental and private agencies will be required to sign the certification page (See *Attachment E*) and submit it with their full grant application if their proposal is accepted.
5. The GJJAC requests that applicants **ALSO submit** a copy of their proposal to the **Regional Program Development Unit** (RPD or local juvenile justice planning unit) in their county, as applicable—not all counties have a local RPD (see *Attachment H*).

### **When to Apply**

Proposals must be **postmarked** no later than **February 27, 2004**, or hand delivered to the Office of Juvenile Justice **no later than 4:00 p.m. that day**. **Late proposals will not be accepted. FAX submissions will not be accepted.**

### **Why Your Proposal Could Be Rejected**

- ?? It is longer than the nine-page proposal limit.
- ?? It exceeds the budget limit.
- ?? It was submitted after the deadline.
- ?? It does not follow the required format or is incomplete (your project description will include narrative and the Logic Model—see Attachments D and G).
- ?? Failure to offer adequate data justification where data is known to exist.

### **Technical Questions?**

If you have questions, or if you need technical assistance on the grant proposal process, please call the Office of Juvenile Justice at 360-407-0151. The GJJAC staff are available to assist you.

Note: Copies of ***Outcomes for Success 2000 Edition***, explaining the Logic Model, are available at Regional Program Development Units (RPDs) throughout the state (see Attachment H). You can also find a list of RPDs (local juvenile justice planning units) on the GJJAC's website at [www.juvenilejustice.dshs.wa.gov](http://www.juvenilejustice.dshs.wa.gov). ***Outcomes for Success 2000 Edition*** was published by ***The Evaluation Forum***, Seattle, WA 98101. Telephone: (206) 269-0171.

### **How Proposals Are Selected**

There are two steps in the proposal selection process:

First, proposals will be rated by the GJJAC according to the proposal format; however, proposals receiving high scores on the rating criteria are not guaranteed selection. Initial ratings are used as a basis for further discussion and evaluation.

Selection decisions may be influenced by other factors, such as:

- ?? verifiable unique needs
- ?? current funding or other resources available in this area
- ?? history of OJJDP grants in the area
- ?? history of the agency in completing other juvenile justice contracts
- ?? future funding potential
- ?? relative cost
- ?? potential duplication of services

- ?? cooperation/coordination among youth serving agencies, DSHS, law enforcement, juvenile court, schools
- ?? use of volunteers
- ?? consideration of minority cultural issues (e.g., “cultural competency” of staff who will provide services)

Second, finalists will be asked to submit a full GJJAC grant application. The grant application follows a similar format, in that it also uses the Logic Model. Finalists will be required to complete a Logic Model format for the proposed independent evaluation. Finalists may be expected to make a brief oral presentation before the GJJAC, and be prepared to answer questions at their meeting in May 2004.

**Note:** *If your agency is asked to submit a full grant application, and you are a governmental agency or a private non-profit agency, you will need to sign the Certification Page (See Attachment E).*

### Governmental Agencies

*Agencies of state or local government must certify that “federal funds...will be so used as to supplement and increase (but not supplant) the level of state, local and other non-federal funds that would, in the absence of such federal funds, be made available for the program described, and will in no event replace such state, local and other non-federal funds.” (See Sec. 223 (a)(21) of the Juvenile Justice and Delinquency Prevention Act). (See Attachment E)*

### Private Agencies

*Under the terms of the Act which provides federal funds for the program, “...direct funding of any local private agency by a state shall be permitted only if such agency requests such funding after it has applied for and been denied funding by any unit of general local government or combination thereof.” Local private agencies submitting a proposal in response to this RFP must include a certification that they have applied for and been denied funding by a unit of local government. (See Attachment E)*

Private agencies which are invited to submit formal grant applications will also be required to submit a copy of an independent audit of their financial records which has been completed within the past two (2) years.

### Cooperative Agreements

Proposals **must indicate** that cooperative agreements have been reached with all agencies, which would participate in, or be directly affected by, project activities.

### Appeals

There are only two bases for an appeal of a GJJAC proposal selection decision. They are:

1. *Misinterpretation, by the GJJAC, of factual material contained in the proposal or full grant application; and*
2. *Unfair or irrelevant criteria applied by GJJAC members.*

Information on the appeal process will be provided upon request.

**Attachment A**  
**2004 Challenge Grant Program**  
**Proposal Face Sheet**

**AGENCY:** \_\_\_\_\_

**PROJECT:** \_\_\_\_\_

**PROJECT DIRECTOR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**TELEPHONE:** (\_\_\_\_) \_\_\_\_\_ **FAX:** (\_\_\_\_) \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**LEGISLATIVE DISTRICT(S):** \_\_\_\_\_ **CONGRESSIONAL DISTRICT:** \_\_\_\_\_

**CHECK ACTIVITY AREA:**    Activity I \_\_\_\_\_    Activity II \_\_\_\_\_    Activity III \_\_\_\_\_

**PROJECT SUMMARY: (Three Sentences Maximum)**

?? Number of juveniles expected to receive direct services: \_\_\_\_\_

?? Number of volunteers used, if any: \_\_\_\_\_

?? Does the project address gender specific programming for girls? \_\_\_\_\_ Yes \_\_\_\_\_ No

?? Does the project target rural or underserved populations? \_\_\_\_\_ Yes \_\_\_\_\_ No

?? Does the project address disproportionate minority contact? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(If Yes: What proportion of funds? \$ \_\_\_\_\_ or \_\_\_\_\_ % of total)

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Attachment B

### 2004 Challenge Grant Proposed Budget\*

\$\_\_\_\_\_ Personnel (\_\_\_ positions)

\$\_\_\_\_\_ Supplies

\$\_\_\_\_\_ Other Services and Charges

\$\_\_\_\_\_ Equipment, Capital Outlay and Other  
Non-Recurring

\$\_\_\_\_\_ Travel

\$\_\_\_\_\_ Contractual (***Must include at least 7% of the total amount requested  
for an outside, independent evaluation.***)

\$\_\_\_\_\_ **Total Direct Costs**

\$\_\_\_\_\_ Indirect (*May not exceed 10% of **Direct Costs***)

\$\_\_\_\_\_ **TOTAL AMOUNT REQUESTED** (May not exceed \$83,000)

**MATCH/INCOME** (match *not* required)

\$\_\_\_\_\_ Fees and Other Income

\$\_\_\_\_\_ Other funding sources (Please list):

\$\_\_\_\_\_ **TOTAL PROJECT BUDGET**

\* Please use the attached Additional Budget Information/Clarification/Instructions to determine appropriate placement of anticipated expenses.

## Attachment C-1

### 2004 OJJDP Challenge Grant Activities Application

#### ACTIVITY I

#### Guidelines for Providing Basic Health, Mental Health, and Educational Programming

The GJJAC is soliciting proposals for one new project that will develop and adopt policies and programs to provide basic health, mental health, and appropriate educational services, including special education for youth in the juvenile justice system, **with a focus on mental health needs**.

Currently in Washington State, basic health, mental health and educational needs of youth involved in the juvenile justice system are not consistently being met. Surveys conducted throughout the state have drawn attention to the problems of providing adequate medical, mental health, and educational services in juvenile detention and state institutions.

Some youth are held in facilities whose current populations exceed their design capacity. The number of youth held in local detention facilities in Washington State has decreased in the past year; however, it has increased by 70% between 1992 and 2002; eight detention facilities experienced an increase of over 10 percent during the five year time period of 1998-2002. The percent of females held in detention facilities has steadily increased by over 57% since 1992.

Admissions to Washington State's Juvenile Rehabilitation Administration institutions have been decreasing, yet the percentage of offenders with mental health disorders has been increasing. Mental illness within the JRA population is more complex and acute than previously understood.

In February 2003, 58 percent of youth in residence met the criteria for the administration's mental health "target population" (i.e., those with serious mental health disorders). Findings indicate that over 90 percent of these youth carry complex mental health diagnoses, including bi-polar disorder, major depression, psychotic disorders, and schizophrenia. Other findings and experiences of county juvenile detention staff also support high rates of mental health problems and learning disabilities among juveniles held in detention facilities.

The Coalition for Juvenile Justice 2000 Annual Report, *Serving the Mental Health Needs of Youth Offenders*, reported that between 50 to 75 percent of incarcerated youth have diagnosable mental health disorders. The report also states that "youth suicide in juvenile detention and correctional institutions occur four times more often than youth suicide in the general public."

A national report summarizes that there are "inadequate and fragmented services for youth with mental health and substance abuse problems in the juvenile justice system," and that there is "failure to provide routine standardized screening and assessments." (Building Blocks for Youth Fact Sheet, *Mental Health Needs of Youth in the Juvenile Justice System*, 2001.)

Research studies have also documented that youth in the juvenile justice system are particularly at risk for sexually transmitted diseases (STD's), unwanted pregnancies, and drug and alcohol dependencies. National studies indicate that among the juvenile justice population, 50 to 75 percent of youth have serious substance abuse problems (National Mental Health Association and National GAINS Center).

Many juvenile offenders have failed in school, and their lack of success in some instances has contributed to their antisocial behavior. A majority of youth in the juvenile justice system have severe



to moderate skill deficits, with past truancy behavior, and/or suspensions and expulsions (National Center on Education, Disability, and Juvenile Justice).





Educational programs in juvenile correctional facilities must include disabilities assessment, eligibility determinations; individual educational plans (IEP's), and services specified in the IEP. The Individuals with Disabilities Education Act, which requires free and appropriate education to all handicapped persons under the age of 21, also applies to correctional educational programs.

The GJJAC supports medical, mental health, and educational services in juvenile correctional facilities (detention and state) that respond to the individual needs of the offender. Projects funded under this activity will provide mental health, medical, and/or educational services, including special education, in county juvenile detention and state correctional institutions that are defined by the needs of the youth held in the facility, **with a focus on mental health needs**.


Programs funded under this activity could include: mental health and health assessments and diagnoses, suicide prevention and treatment, anger management, gender specific programs for girls, staff training, treatment plans based on thorough assessment, substance abuse prevention and treatment, social skills training and cognitive reasoning training, workplace competencies, and comprehensive, individualized educational programs based on the needs of the youth. Program designs should provide links with community providers and with employers to enhance current programs, and provide post-release support for the youth. Plans should be described to sustain the program beyond the funding cycle.

Assessments and treatment plans will include the input of clients, examine their strengths, and identify what they need to stop their delinquent behavior. The Standards for Administration of Juvenile Justice developed by the National Advisory Committee for Juvenile Justice and Delinquency Prevention will serve as the baseline for the provisions of services to juveniles. (See Attachment I).

**The Outcomes/Goals of the project funded under Activity II are:**

-  To reduce chronic and acute health and mental health problems among incarcerated youth, and youth on probation or parole.
-  To provide effective mental health, medical, educational and special education interventions for incarcerated youth and youth on parole.
-  To develop and adopt policies and programs to provide basic health, mental health, and appropriate education for youth in the juvenile justice system as specified in the standards developed by the National Advisory Committee for Juvenile Justice and Delinquency Prevention prior to October 12, 1984. (See Appendix A)
-  To reduce antisocial and delinquent behavior by providing appropriate medical and mental health assessment screenings, treatment and follow-up, and comprehensive educational programs and other programs aimed at enhancing the social, cognitive and life skills of incarcerated youth. (Education should be the centerpiece of the incarcerated juvenile's institutional experience.)

**The Activities/Objectives of the projects funded under Activity II may include:** *(Objectives are not listed in any order. Any one or a combination of these objectives may be addressed, or other related objectives may be proposed).*

-  To provide appropriate assessment and diagnoses of mental health problems of confined juveniles, and treatment referrals/follow-up.

- ~~///~~ To provide appropriate mental health services to incarcerated juveniles. Such services may include: social skills training, intensive supervision, one-on-one staff work with youth, and small special education sessions that apply principles of supporting youth to succeed.
- ~~///~~ To provide mental health services to youth who use and/or abuse drugs and alcohol, which teach youth less self-destructive ways to manage their sense of hopelessness and anger.
- ~~///~~ To provide programs that identify and treat youth who are severely depressed, suicidal, or psychotic, related to their confinement. (These conditions contribute to a lack of empathy for their victims, including other residents and staff.)
- ~~///~~ To provide mental health services that involve families to support the youth's treatment and rehabilitative goals, and that assist families in supporting positive behavior in youth and to guide them away from self-destructive choices.
- ~~///~~ To provide training to sensitize juvenile justice personnel in order to appropriately assess and serve the health, mental health, and educational needs of youth arrested, charged, incarcerated or on probation and parole.
- ~~///~~ To implement full health examinations of juveniles in detention and correctional facilities soon after admission. These examinations can uncover unknown health problems and prevent the spread of disease among confined youth and facility staff, as well as provide youth with needed health education and referral to community health resources.
- ~~///~~ To provide medical services that meet the acute (injuries, infections, dental emergencies and pregnancy) and chronic health (substance abuse, asthma, STD, and routine dental care) needs of confined youth, and to arrange continuing care when youth are released from detention or institutional care.
- ~~///~~ To provide adequate training for non-medical staff who may perform some of the health care functions. (Responsibilities of the medical and non-medical staff must be clearly defined.)
- ~~///~~ To provide educational programs that meet individual needs. Components of such a program may include: vocational training opportunities, transitional services that link the correctional education services to prior educational experiences and to the educational and human services needed after release, and effective staff training.
- ~~///~~ To provide educational programs that include disability assessments and individual educational plans.
- ~~///~~ To provide programs that include cognitive skills curricula that focus on such areas as social interactions and communications, problem solving, creative thinking, decision making, conflict resolution and responsibility, and programs that integrate these skills into life at the facility.

## Attachment C-2

### 2004 OJJDP Challenge Grant Activities Application

#### ACTIVITY II

#### Guidelines for Providing Non-Secure Community Alternatives

The GJJAC is soliciting proposals for a project to provide a model community alternative to secure confinement, with an emphasis on juvenile “holdover” type programs, or other community alternatives (reception center, emergency/receiving home, etc.). This project would provide safe, short-term supervision for status offenders and non offenders,<sup>1</sup> who may be waiting to be reunited with family or a guardian, awaiting placement in an appropriate juvenile facility, or awaiting a court appearance. Holdover programs can provide a safe, temporary location for youth who may not meet detention criteria, but are in need of a place to stay until other appropriate arrangements for their care can be completed, or a parent or guardian can be reached.

There were 8,070 juvenile arrests for drug and alcohol offenses in Washington State in 2002—4,409 were liquor law violations. While the overall juvenile arrest rate, and arrests for many crimes have decreased significantly in recent years, arrests for alcohol and drug possession have not. The number of arrests for drug and alcohol offenses started an upward trend in 1992, with a 59 percent increase in the number of arrests from 1992 to 2002, and a 27 percent increase in the rate of drug and alcohol arrests per 1,000 juveniles age 10-17 from 1992 to 2002.

Local law enforcement agencies, particularly in rural areas, have few community alternatives when looking for short-term, non-secure supervision for these youth--hospitals usually will not take an intoxicated youth, and detoxification centers, Crisis Residential Centers, and receiving homes are not always available or accessible. Crisis mental health clinics are not always available when a law enforcement officer has picked up a youth in the midst of a mental health crisis. Parents or guardians may not be available when a youth is found in a dangerous situation.

The number of Regional Crisis Residential Center beds in our state has decreased in recent years, from 59 beds in 2000, to 52 beds in 2002-03. Additionally, Group CRC beds in the state have declined substantially (from 36 beds in 1990 to 4 beds in 2001), and were totally eliminated in 2002.

Juvenile holdover-type programs can provide a safe, supervised short-term alternative for law enforcement agencies faced with holding status offenders and non-offenders, who should not be locked up securely in an adult jail or lockup. This allows the officers to place the care of a youth with another entity and return to their primary duties, while a parent/guardian or another responsible party is being located--agencies, particularly in rural areas, have limited staffing available to supervise these youth as needed. Particularly, when no parent, legal guardian, or other responsible adult can be found, and there is no juvenile detention facility, hospital, or receiving home in the immediate area to which the youth can be easily transported (as appropriate).

Programs funded under this activity could include: juvenile holdover programs (may be based on the OJJDP guide, “An Implementation Guide for Juvenile Holdover Programs: Tools for Assuring Your Success”<sup>2</sup>), emergency/receiving homes, or other local community alternatives. Program designs should provide collaboration between law enforcement, juvenile court, regional DCFS, and with other local agencies and providers (experts in substance abuse, child welfare, mental health, etc.). The project could use paid staff and/or trained adult volunteers, on call, to stay with the youth (staff secure programs) until a responsible adult family member or guardian is available, or until the

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<sup>1</sup> **Status offenders** are youth who have been charged with, or adjudicated for, conduct which would not be a crime if committed by an adult. The following are examples of status offenses: truancy, curfew violations, unruly, runaway, underage possession and/or consumption of alcohol or tobacco products. **Non-offenders** are defined as juveniles who are subject to the jurisdiction of the juvenile court, usually under abuse, dependency, or neglect statutes, for reasons other than legally prohibited conduct of the juvenile.

<sup>2</sup> <http://www.nhtsa.dot.gov/people/injury/alcohol/juvenile/toc.html>

youth can be transferred to a juvenile facility, as appropriate. Plans should be described to sustain the program beyond the funding cycle, and provide for replicability.

**The Outcomes/Goals of the project funded under Activity II are:**

- ~~///~~ To fully comply with the Juvenile Justice and Delinquency Prevention Act (remove non-offending youth and status offenders from locked facilities, and eliminate the confinement of juveniles in adult jails and lockups).
- ~~///~~ To provide for suitable, short-term, supervised, safe places for status offenders or non-offenders who are picked up by law enforcement.
- ~~///~~ To demonstrate that MIPs, and other status offenders or non-offenders, can be easily transported and held safely outside of adult jails, at no risk to the community or the juvenile, and at a reasonable cost.
- ~~///~~ To replicate, throughout Washington State, the model holdover program.

**The Activities/Objectives of the projects funded under Activity II may include :** *(Activities are not listed in any order. Any one or a combination of these activities may be addressed, or other related activities may be proposed).*

- ~~///~~ To provide planning support and one-year of funding so that a city or a county can establish a demonstration “Holdover” program, or other non-secure alternative, such as a reception center for youth or a temporary shelter. A holdover program may be a separate entity, or it may be part of another agency’s programs, such as an intake and assessment center.
- ~~///~~ To provide short-term (typically 24 hours or less) supervision, 24 hours per day, 7 days per week, for status offenders and non-offenders in a staff secure, or non-secure, environment.
- ~~///~~ To encourage collaborative, community-based planning (e.g., to include law enforcement, juvenile court administrators/juvenile probation, Children’s Administration, DSHS; Regional Mental Health Networks, Division of Mental Health, DSHS; the Division of Alcohol and Substance Abuse, DSHS; community substance abuse prevention coalitions, hospitals, and others), so that after the Challenge Grant funding ends, the project will be able to continue.
- ~~///~~ To establish city and/or county policies so that a “Holdover” project can be implemented and succeed.
- ~~///~~ To train adult volunteers to help staff a “Holdover” project or a reception center.
- ~~///~~ To provide technical assistance to establish and replicate a model holdover program.

## Attachment C-3

### ACTIVITY III

#### **Project Guidelines to Develop and Adopt Policies and Programs Designed to Serve as Alternatives to Suspension and Expulsion from School**

The Governor's Juvenile Justice Advisory Committee (GJJAC) is soliciting proposals for one new project to provide alternatives to school suspensions and expulsions, and to assist students to re-enter school when long-term suspensions and expulsions do occur.

The National Center for Educational Statistics estimated that in 1999, on an average school day, as many as 15 percent of junior and senior high school students were not in school. For many, this is a pattern that leads to substance abuse, delinquency, as well as dropping out of school. Dropping out of school can have a profound effect on a young person's life, resulting in lower earnings and fewer opportunities.

Washington State law, RCW 9.41.280, requires a one-year expulsion from school for possession of firearms on school premises. Many school districts across Washington State have adopted Zero Tolerance policies regarding alcohol, drug possession or weapon possession in their buildings. In turn, many students are now suspended or expelled, and may not return to school to complete their education. While this legislation and other Zero Tolerance policies help to ensure that schools are safe learning environments for all children, they also create a condition where the most vulnerable youth are suspended or expelled, without structure or access to education or services.

While data is not available regarding the total number of long-term suspensions and expulsions from schools in Washington, the Superintendent of Public Instruction's 2002 report to the Legislature showed that 2,726 incidents of violations of RCW 9.41.280 (involving the possession of weapons on school premises) occurred in the state's public schools.

According to the longitudinal research of J. David Hawkins and Richard Catalano, at the University of Washington, there is a correlation between school attendance and performance, and risk behaviors including substance abuse and delinquency. Not attending school regularly can increase a youth's risk for delinquency. Furthermore, a state survey on Adolescent Health conducted in 1998, showed a relationship between alcohol and other drug use and carrying weapons.

***Helping Students Finish School***, a report released by the Office of the Superintendent of Public Instruction (Washington), December 2003, estimated that the on-time graduation rate for the Class of 2001 was 67 percent, and the estimated on-time graduation rate for the class of 2002 was 66 percent. Of the remaining 33 or 34 percent, the report estimated that 8 percent are continuing their education beyond the four years. This means that approximately one in four Washington students in the classes of 2001 and 2002 may have dropped out of school. Because suspension and expulsion data is not available, we do not know how many students failed to return to school pursuant to suspension or expulsion.

In addition to the Zero Tolerance policies for weapons and possession of controlled substances and alcohol, there is an increasing trend of suspending students for behaviors that would not have led to suspension in the past (e.g. tardiness, language, etc.).

Parents, school districts, social services, law enforcement, and the juvenile justice system need to work together to provide a comprehensive approach to meet the needs of suspended or expelled youth. Keeping these youth in school is both good for the youth, and good for the community. The Governor's Juvenile Justice Advisory Committee recognizes the need to keep students in school, and to provide educational programs for suspended or expelled students.

**The Outcomes/Goals of the Project Funded under Activity III Are:**

- ~~✍~~ Provide a comprehensive program model to keep or return suspended or expelled youth in school.
- ~~✍~~ Provide appropriate educational and social skill development for suspended or expelled youth to re-enter a general education program.
- ~~✍~~ Develop and adopt school discipline policies and procedures designed to keep youth in school.

**The Activities/Objectives of the project may include:** Activities are not listed in any order. Any one or combination of these activities may be addressed, **or other research-based activities may be proposed.**

- ~~✍~~ To provide academic education, life skills training, conflict resolution skills training, peer mediation, employment, role models, tutors, mentors, etc. to reduce behaviors that resulted in suspension or expulsion, and successfully transition youth back into an educational program.
- ~~✍~~ To provide opportunities for parental involvement in the educational planning for their children.
- ~~✍~~ To provide and promote coordinated, collaborative prevention, intervention and rehabilitative efforts that target youth who are suspended or expelled from school.
- ~~✍~~ To provide assessment and access to appropriate resources, including educational resources, for youth who are suspended or expelled from school.
- ~~✍~~ To provide programs that motivate youth towards pro-social behavior, towards understanding the importance of completing their education, and towards setting and achieving goals consistent with successful outcomes for youth.
- ~~✍~~ To provide programs to promote personal and social accountability.
- ~~✍~~ To provide comprehensive education programs that include basic education, high school completion, GED preparation, special education, high school credit retrieval, pre-employment training, and other programs aimed at enhancing students' social, cognitive, and life skills.

# **OJJDP Challenge Grant Activities Application Attachment D**

## **PROPOSAL FORMAT**

Submit a **seven-page (maximum) description** of your proposed project using the format shown below. Your project description will include narrative and the **Logic Model** (see Attachment G). An example of the Logic Model is shown on page 16. Your total proposal **must not exceed nine total pages**, including the **Proposal Face Sheet** and **Proposed Budget**, (Attachments A and B). The proposal format will match the GJJAC members' rating sheet.

- A. General Needs Statement** *(one page maximum)* **15 Points**
1. State the need this project is designed to alleviate.
  2. Support the need by statistical information.
  3. List other possible community resources.
  4. Indicate why other community resources are not adequate to meet the need.
  5. State how the project will address the need.
- B. Implementation and Methods** *(1 page maximum)* **15 Points**
1. Describe the research-based methods and techniques to be used to meet the proposed objectives and identify the research approach. (Program must be based on sound theory supported by positive or promising research results.)
  2. Identify the sources, expected number of referrals, and the manner in which those referrals are likely to occur.
  3. As applicable, outline the involvement of any other community organization/agency (DCFS, human services, juvenile court, schools, law enforcement, support groups, service clubs, etc.) *(If a full grant application is requested by the GJJAC as a result of the proposal, signed letters of agreement from these agencies will be required.)*
  4. Describe staffing and staff qualifications.
- C. Budget Justification Narrative** *(1 page maximum)* **10 Points**
1. Justify your proposed budget expenses in all budget categories.
  2. Explain how your proposed personnel costs are comparable to similar positions in your community.
  3. Explain how the project will be funded when grant funds are no longer available.
- D. Description of your proposed Resources, Activities, Outputs, Outcomes and Goals using the Logic Model Format** *(4 pages maximum)* **60 Points**
- A Blank Logic Model Format is attached in Attachment G at the end of this document. An example of the Logic Model format, showing several different types of resources, activities, outputs, outcomes and goals, is shown on the next page.*

## Attachment E

### 2004 Challenge Grant Certifications

**NOTE:** This page need **not** be attached to your nine-page proposal. It is included for your information only. **If your project is selected to submit a full grant application, this page must be signed and attached to the full grant application.**

#### GOVERNMENTAL AGENCIES

I hereby certify that the federal Office of Juvenile Justice and Delinquency Prevention (OJJDP) funds for which I am applying will not be used to supplant other state, local or other non-federal funds.

---

Agency Director Authorized to Sign

Date

---

#### PRIVATE AGENCIES

I hereby certify that I have applied for and have been denied funding for this project by a unit of local government or a combination of local governments.

---

Chairperson, Board of Directors,  
Authorized to Sign

Date



## **Attachment F**

### **ADDITIONAL BUDGET INFORMATION**

#### **Personnel**

Only the costs of personnel directly involved in project activities should be included in the Personnel budget.

The cost of staff who provide some supportive services, but whose positions would be filled whether the project was funded or not, may not be charged as a personnel cost. The types of positions often falling into this category include agency supervisors and administrators, general support staff such as receptionists, maintenance personnel, etc. These costs must be covered by the Indirect Cost budget.

#### **Caution:**

*The non-supplanting rule states that an agency cannot simply maintain its level of service at lower cost by transferring personnel to grant-funded positions. Activities undertaken with grant funds must be in addition to, not instead of, current services.*

*The same rule precludes transferring a portion of the cost of a position, which is currently funded from other sources to the grant budget unless a new position, for an equal amount of time, is created and filled. For example, a secretary is currently employed full-time by the applicant agency, but will devote half of his/her time to grant-funded project activities in the future. One-half of his/her time may not be charged to the project budget - unless a new half-time secretarial position is created and filled.*

*Non-supplanting can be a particularly difficult issue to understand. Do not hesitate to call the Office of Juvenile Justice at (360) 407-0151, if you have questions.*

#### **Supplies**

The key word in determining whether an item belongs in the Supplies category is "consumable." If it can be used up, then it is a supply item.

The exception to the "consumable" guideline is training material such as books, films and videotapes. These are considered consumable because they are obviously not fixed assets and can become worn out or outdated.

#### **Other Services and Charges**

This category is for services other than Personnel, which are required in the administration of the project. Such services may include communication, transportation, advertising, and rentals.

The only confusion that seems to arise with regard to this category involves the transportation item. Note that the kind of transportation included in this category involves the movement of things. Travel of people (project personnel, consultants, etc.) is reported in the Travel budget (category E).

#### **Capital Outlay/Equipment**

Tangible property (e.g., typewriters, desks, VCR's, files) with a useful life of more than one year and an initial cost of more than \$300 is included in this budget category.

*Please note that the state retains an ownership interest in any item with an initial unit cost of \$1,000 or more. The state must agree to any proposed disposition of the property.*

All property purchased under this category must be inventoried and reported at the end of the grant period.

### **Travel**

All travel costs are included in this category, including personal car mileage, airfares, per diem, etc. (must meet federal and state guidelines).

### **Contractual**

Any contract the project awards will be entered in this budget category.

The important distinction to remember is that when an agency contracts with an individual - no matter what service is to be delivered - the cost is reported in Contractual, not in Personnel. An example of a cost in this category is the outside evaluator.

### **Indirect**

Costs of agency operation, including administration and supervision not directly included in project operation, are included as Indirect costs.

Remember to calculate Indirect costs on the basis of total direct costs, not as a percentage of total project cost.

***If you have difficulty understanding or calculating allowable Indirect costs, please call the Office of Juvenile Justice at (360) 407-0151.***

## Attachment G-1

### Example of the Logic Model<sup>3</sup>

#### Process

#### Outcome

?	?	?	?	
Resources	Activities	Outputs	Outcomes	Goal(s)
Program inputs. Elements or ingredients that constitute the program.	Methods for providing the program. Specific processes or events undertaken.	Units of service or product units. How many, how often, over what duration?	Short intermediate or longer-term changes anticipated in participants' lives and/or in organization or community conditions.	Ultimate impacts(s) expected to occur, usually beyond what one program alone can achieve.
<b>For example:</b> <del>///</del> 3 FTEs. <del>///</del> After school facility and playground. <del>///</del> College student volunteers. <del>///</del> Foundation funding. <del>///</del> At-risk 6 <sup>th</sup> grade students.	<b>For example:</b> <del>///</del> After school mentoring. <del>///</del> Homework assistance. <del>///</del> Sports and exercise. <del>///</del> Healthy snack. <del>///</del> Positive reinforcement for non-aggressive behavior.	<b>For example:</b> <del>///</del> Three-hour program everyday after school for 40 at-risk students. <del>///</del> One hour homework assistance. <del>///</del> One hour sports and exercise. <del>///</del> One hour snack and reading.	<b>For example:</b> <del>///</del> Increase in grades by 25 percent (GPA) at end of school year. <del>///</del> Increase in pro-social behaviors by 30 percent by the end of service delivery. <del>///</del> Decrease in aggressive behaviors by 25 percent by the end of the project year. <del>///</del> Decrease in recidivism by 20 percent by the end of the six-month follow up.	<b>For example:</b> <del>///</del> Prevention of juvenile delinquency. <del>///</del> Prevention of violent behavior.

<sup>3</sup>This was adapted from page 31, *Outcomes for Success 2000 Edition*, by the Evaluation Forum, Organizational Research Services, Inc. and Clegg and Associates.

## Attachment G-2

### Logic Model for 2002 Challenge Grant RFP<sup>4</sup>

**Process**

**Outcome**

?	?	?	?	
Resources	Activities	Outputs	Outcomes	Goal(s)
Program inputs. elements or ingredients that constitute the program.	Methods for providing the program. Specific processes or events undertaken.	Units of service or product units. How many, how often, over what duration?	Short intermediate or longer-term changes anticipated in participants' lives and/or in organization or community conditions.	Ultimate impacts(s) expected to occur, usually beyond what one program alone can achieve.

<sup>4</sup> This was adapted from page 31, *Outcomes for Success 2000 Edition*, by the Evaluation Forum, Organizational Research Services, Inc. and Clegg and Associates.

## ATTACHMENT H

### Regional Program Development Units

**Benton/Franklin Juvenile Justice Center**  
***"Regional Program Development"***

5606 West Canal Place, Suite 106  
Kennewick, WA 99336  
Contact: Mary Lee Pickett  
(509) 783-2151  
Fax (509) 736-2728  
(Benton-Franklin Counties)

**Community Youth Services**  
***"Regional Program Development"***

711 N.E. State Avenue  
Olympia, WA 98506  
Contact: Charles Shelan  
(360) 943-0780 ext. 138  
Fax (360) 943-0785  
(Thurston County)

**Educational Service District #113**  
***"Regional Program Development"***

601 McPhee Road SW  
Olympia, WA 98502  
Contact: Lee Bucsko  
(360) 532-2437  
Fax (360) 532-8744  
(Grays Harbor County)

**Jefferson County Juvenile Services**  
***"Regional Program Development"***

1820 Jefferson Street  
Port Townsend, WA. 98368  
Contact: Barbara Carr  
(360) 385-9190  
Fax: (360) 385-9191

**Kittitas County Probation Services**  
***"Regional Program Development"***

205 West 5<sup>th</sup>, Rm 211 Courthouse  
Ellensburg, WA 98926  
Contact: William Holmes  
(509) 962-7516  
Fax (509) 962-7667

**Mason County Drug Abuse Prevention**  
***"Regional Program Development"***

PO Box 1576  
Shelton, WA 98584  
Contact: Julianna Miljour  
(360) 427-9670 ext. 396  
Fax (360) 427-3223

**Clallam County Community Health and Safety Network**  
***"Regional Program Development"***

PO Box 2729  
Port Angeles, WA 98362  
Contact: Pete Peterson  
(360) 417-2282, ext. 226  
Fax (360) 417-2468

**Cowlitz/Wahkiakum Council of Governments**  
***"Regional Program Development"***

Administration Annex  
207 4th Avenue North  
Kelso, WA 98626  
Contact: Ramona R. Leber  
(360) 577-3041  
Fax (360) 425-7760

**Human Services Council**  
***"Regional Program Development"***

7414 NE Hazel Dell Avenue  
PO Box 425  
Vancouver, WA 98665-0425  
Contact: Anne Turner  
(360) 694-6577  
Fax (360) 694-6716  
(Clark County)

**King County Office of Management and Budget**  
***"Regional Program Development"***

516 3<sup>rd</sup> Avenue. #420  
Seattle, WA 98104  
Contact: Michael Gedeon  
(206) 205-9532  
Fax: (206) 205-9432

**Kitsap County Board of Commissioners**  
***"Regional Program Development"***

614 Division Street, MS #23  
Port Orchard, WA 98366-4676  
Contact: Gay Neal  
(360) 337-4879  
Fax (360) 337-7187

**Lewis County Juvenile Court**  
***"Regional Program Development"***

360 NW North, MS: JUV01  
Chehalis WA 98532  
Contact: Scott Hedlund  
(360) 740-2621  
Fax: (360) 740-1473

**Northwest Regional Council**  
***"Regional Program Development"***

600 Lakeway Drive  
Bellingham, WA 98225  
Contact: Victoria Doerper  
(360) 676-6749  
Fax (360) 738-2451  
(Whatcom, Skagit, Island, and San Juan Counties)

**Snohomish County Human Services Dept.**  
***"Regional Program Development"***

2722 Colby Avenue, Suite 104  
Everett, WA 98201  
Contact: Dan N. Bond  
(425) 388-7227  
Fax (425) 259-1444

**Sunnyside's Promise**  
***"Regional Program Development"***

810 B East Custer Ave./P O Box 1087  
Sunnyside, WA 98944  
Contact: Edwin Radder  
(509) 836-6201  
Fax: (509) 837-5873  
(Yakima County)

**NorthEast Washington Treatment Alternatives**  
***"Regional Program Development"***

1224 N. Ash  
Spokane, WA 99201  
Contact: James R. Smith  
(509) 477-6355  
Fax (509) 326-6725  
(Spokane County)

**Walla Walla County Dept. of Human Services**  
***"Regional Program Development"***

310 West Poplar/PO Box 1595  
Walla Walla, WA 99362  
Contact: Sharon Saffer  
(509) 527-3278  
Fax (509) 527-3219

**Walla Walla County Dept. of Court Services**  
***"Columbia Cty Regional Program Development"***

455 W. Rose Street  
Walla Walla, WA 99362  
Contact: Michael Bates  
(509) 527-3275 x 113  
Fax: (509) 527-3231  
(Columbia County)

**Whitman County Juvenile Services**  
***"Regional Program Development"***

N. 400 Main Street/PO Box 598  
Colfax, WA 99111  
Contact: Chad Connors  
(509) 397-6246  
Fax (509) 397-5591

### **Appendix: Standards for the Administration of Juvenile Justice**

#### **National Advisory Committee for Juvenile Justice and Delinquency Prevention**

##### **4.213 Services**

At a minimum, juveniles placed in training schools should have access to the services described in Standards 4.214-4.218. When location and security permit, arrangements should be made for appropriate residents to receive these services in the community.

##### **4.214 Development and Implementation of an Individual Program Plan**

Within 15 days of a juvenile's admission to a training school, a comprehensive assessment report should be completed. This report should provide an evaluation of the juvenile's specific problems, deficiencies, and resources, and contain the individual's program plan.

An assessment team, composed of a caseworker, a youth-care worker, an educational diagnostician, a psychiatrist, and a psychologist, should perform the assessment.

The assessment should include: family history, developmental history, physical examinations, psychological testing, psychiatric interviews, community evaluation, language and educational analyses, and information concerning the nature and circumstances of the conduct on which the adjudication is based. It should be the responsibility of the family court to ensure that any of the above material in its possession is forwarded to the training school.

After all assessment team members have completed their respective tasks, they should meet together to discuss the findings and finalize their recommendation for the juvenile's program plan. At such meetings, and throughout the assessment process, the juvenile should be given full opportunity to participate in the formulation of the program plan and to have a voice in determining his/her program goals.

The juvenile should be given a copy of the program plan; a copy should be maintained in the juvenile's institutional file; and a copy should be forwarded to the placing family court.

The plan should be reviewed monthly by appropriate staff including members of the assessment team and other members of the treatment staff with knowledge of the juvenile's progress under the plan. Any change in the plan should be noted in the juvenile's file and notification of the significant modifications forwarded to the placing family court.

##### **4.215 Individual and Group Counseling Programs**

Training schools should provide a broad range of individual and group counseling programs with emphasis upon positive reinforcement and strict limits on negative reinforcement.

##### **4.2151 Group Therapy**

Group therapy should be conducted in groups no larger than 10 and should meet at least once per week. Such therapy should be conducted by group leaders whose experience and training are commensurate with the type of therapy being provided and the responsibilities that they have for supervising the group.

##### **4.216 Educational Services**

Training school education programs should provide for the diverse educational needs of the juveniles placed therein, and should include academic, vocational, and special education components.

##### **4.2161 Academic Education**

A curriculum substantially equivalent to that required under the law of the jurisdiction for public school students should be available to all juveniles placed in a training school. The academic program should meet all requirements necessary for the transfer of earned credits to public schools within the state and should be certified to award academic diplomas to juveniles who meet the requirements for the award of such diplomas during their placement.

##### **4.2162 Vocational Education**

All juveniles should receive career counseling to provide them with knowledge of a wide range of career options and with sufficient information and to choose among vocational and academic areas of emphasis.

A vocational education curriculum should be available to juveniles age 14 and over who choose to participate. Participating juveniles should receive at least 3 hours of vocational instruction per week in addition to academic studies, and those who at age 15.5 decide to undertake vocational education as their major area of emphasis should receive at least 15 hours of vocational instruction per week. An employability plan, based on extensive counseling regarding career options, should be developed for each juvenile participating in their vocational education program.

Limits should be established for "work-experience" training consisting of institution-maintenance activities. In no case should those activities constitute the primary focus of a vocational education program.

##### **4.2163 Special Education**

Special education programs should be available to meet the needs of juveniles who are educationally disadvantaged. Juveniles who should be provided with special education include those who:

- a) Exhibit subaverage general intellectual functioning, possibly in conjunction with deficient adaptive and/or physical impairments which inhibit their ability to learn;

- b) Exhibit average general intellectual functioning, although have a visual, hearing, or speech impairment or emotional disturbance that significantly inhibits their ability to learn; and
- c) Despite average intelligence, adequate hearing, vision, motor capacity, and emotional adjustment, exhibit a substantial deficiency in learning and conceptualizing which is frequently demonstrated by their inability to read or clearly and consistently understand spoken language.

In utilizing intelligence quotient and achievement tests to determine whether a juvenile requires special education, primary reliance should be placed on those tests which are appropriate for the juvenile's ethnic and cultural background.

#### **4.217 Health and Mental Health Services**

Training schools should provide programs to protect and promote the physical and mental well-being of juveniles placed therein, to discover those in need of short-term and long-term medical and dental treatment, and to contribute to their rehabilitation by appropriate diagnosis and treatment.

Training schools should undertake treatment of health problems, without cost to the juvenile or his/her family including medical care and correction of health defects of a cosmetic nature. Procedures should be established for assuring the continuation and completion of treatment begun in a facility whenever a juvenile remains subject to the disposition of the family court following release from the training school.

Health services available to juveniles placed in a training school should be of equal quality to those available in the community.

##### **4.2171 Initial Health Examination and Assessment**

Each juvenile, as part of the admittance procedures, should be examined for apparent injuries, and for fever or other signs of illness. The examining officer should also note the juvenile's level of consciousness and level of gross motor function. Written standing orders should define the conditions which require prompt medical or nursing attention.

All juveniles placed in a training school should undergo a health assessment at the first possible opportunity after admission. Exceptions should only be made for juveniles with a written record of a thorough health assessment which is sufficiently current so that no substantial change can be reasonably expected. Health assessment should include physical examination within 24 hours of admission, the taking of a medical history, the taking of a mental history if necessary, screening for vision and hearing defects. Conditions which might affect behavior, such as epilepsy or diabetes, should be reported to the appropriate assessment team in a manner compatible with medical ethics and the rights of the patient.

##### **4.217 Responsibility Toward Patients**

Appropriate permission should be obtained for the performance of significant medical and dental procedures. Permission for such procedures should be obtained from a juvenile's parents or guardian unless the juvenile has a legal right to receive the medical or dental service without that consent.

All medical and dental care should be rendered with consideration for the juvenile's dignity and feelings. Medical procedures should

be performed in privacy and in a manner designed to encourage the juvenile's subsequent utilization of appropriate medical, dental, and other health services.

The use of any procedures, techniques, or medications that have not previously passed rigorous scientific tests which demonstrate both their safety and their effectiveness, or that pose an unnecessary threat to the juvenile's physical or mental well-being, should be prohibited.

##### **4.2173 Diet**

Training schools should provide an adequate, varied diet and well-prepared and well-served meals supervised by a licensed dietician who should receive special training pertaining to allergic reaction, hyperactivity, and other mental, emotional and physical reactions of susceptible youth to particular food substances.

Weekly menus should be prepared and copies should be posted and maintained centrally within the facility. All deviations from the weekly menu should be recorded.

To the extent possible, food ordering and preparation should take into consideration ethnic tastes and food preferences of the juveniles.

##### **4.2174 Mental Health Services**

Psychiatric services in training schools should concentrate on diagnosis and training of staff who have daily contact with juveniles. Diagnosis should be utilized to determine whether the juvenile is appropriate for the training school program and to assess the juvenile's treatment needs. Staff training and consultation should be utilized primarily to assist childcare workers and other staff with direct treatment responsibilities in helping their charges through group and individual approaches.

When therapeutic mental health services are provided, the juvenile's family should be involved insofar as is possible and consistent with the needs of the juvenile. Individual therapy should only be conducted by psychiatrists, psychologists who have a doctoral or masters degree in psychology, or individuals with masters degrees in social work and counseling.

All juveniles placed in training schools should be informed upon entry that they may request of any training school employee a personal consultation with either a psychiatrist or psychologist. Consultation with either a psychiatrist or psychologist, selected by the training school, should be provided as quickly as possible.

##### **4.218 Recreational Services**

Training schools should provide opportunities for exercise and constructive and entertaining leisure-time activity. The opportunities should be in addition to the physical education requirements that may exist under the education laws of the jurisdiction. Activities should be balanced between individual-type and team-type activities of both indoor and outdoor varieties. At least 2 hours of recreation should be provided on school days and 3 hours on nonschool days, not including unsupervised periods spent primarily in such activities as watching television.

##### **4.223 Services**

Camps and ranches should offer a broad range of services including, but not limited to, the specific service areas described below.



A treatment plan should be prepared jointly by each juvenile and his/her assessment team. Each assessment team should be composed of a childcare worker, a caseworker, and a teacher. The plan should provide a structured schedule of activities, counseling, and education, but should not involve intensive psychotherapy because juveniles with deep-seated emotional or psychological problems should be treated at facilities closer to community resources.

The primary emphasis of the treatment strategy of a camp or ranch should be on a work-oriented program. However, remediation resources should be available to juveniles requiring specific academic attention as an adjunct to their vocational training experience.

Camps and ranches should have contractual relationships with local physicians and hospitals for the delivery of medical and dental needs which cannot be fulfilled by the staff. These arrangements should include screening and assessment of incoming juveniles, 2-hour emergency care procedures and routine medical care procedures. Each camp or ranch should have a written medical care plan detailing by name and telephone number the person or institution to be contacted for each category of medical care.

#### **4.233 Services**

Inhouse services at all group homes should include shelter, food, recreation, temporary financial assistance, and individual and/or group counseling. Juveniles placed in group homes should have access, as their particular needs require, to services in the community which are not provided inhouse. Among the community services which should be available to such juveniles are medical, psychiatric, and dental care; psychiatric evaluation, counseling, and therapy; vocational training; vocational and/or employment counseling and evaluation; employment placement; and academic upgrading. Supplementary services in these areas may also be provided by the group home.

Before or upon admission to a group home, a juvenile and, whenever possible, his/her family should assist in the preparation of an assessment of needs and the development of a plan establishing goals to be achieved during the juvenile's stay. In helping the juvenile to accomplish these goals, the group home's role should be similar to that of a properly functioning natural home, including the provision of necessities; assisting juveniles to overcome difficulties in a broad range of areas; and serving as a place to which juveniles can turn in time of need.

A single case record for each juvenile admitted to a group home should be maintained.

#### **4.252 Services**

The foster home should be a family setting. Concentration should be upon comfort and privacy in the living arrangements, the parenting skills of the houseparents and accessibility of the home to schools, recreation, and special resources such as medical clinics required by the juveniles placed therein.

#### **4.263 Services**

Although detention centers should not be considered as treatment facilities, detained juveniles should be provided with educational, medical, recreational, and other services appropriate to their needs, and an adequate and competent staff.

Upon admission, or as soon as possible thereafter, there should be an assessment of a juvenile's needs including an examination by a physician within 24 hours of admission, and a determination of the juvenile's educational level.

Contractual arrangements should be made with a nearby hospital for all medical services which cannot be appropriately provided within the facility or where contractual arrangements can result in better or a broader range of services. A medical record should be maintained and all should be provided for pursuant to the physician's instructions. Each juvenile should also be afforded reasonable access to psychiatric counseling and crisis intervention services in accordance with his/her needs.

The educational program provided in detention facilities should seek to assist detained juveniles to keep up with their studies to the greatest extent possible. Remedial education services should be provided for those juveniles who require it.

The recreational program should provide opportunities for exercise and constructive leisure-time activity. At least 2 hours of recreation should be provided on school days, and 3 hours of recreation on non school days, not including unsupervised periods spent primarily in such activities as watching television.

#### **4.32 Services**

A broad range of services should be available to persons subject to community supervision. Ordinarily such services should be provided by the community rather than directly by the supervision agency.

Upon placement under community supervision, the person supervised and, whenever possible, his/her family, should assist in the preparation of an assessment of needs and the development of a plan establishing the goals to be achieved during the supervision period.

The family court should have the authority to order supplemental services to families when such services are necessary to enable the juvenile or family to participate in a nonresidential program. Among the supplemental services which should be available are homemaker services for a juvenile's family and cash payments directly to the juvenile when supervised independent living is appropriate.

Whenever specific supplemental or other services ordered by the family court are not available, an application to review and modify the disposition decision should be submitted pursuant to Standard 3.189.